Authorisation

3275ET/0825

You can use this form to authorise someone to manage your affairs with us by post or over the telephone. But even if you authorise someone else, you will still be responsible for making sure that your affairs with the SVB are handled properly and on time. You can also authorise someone to manage your affairs online in My SVB, but you cannot use this form for that purpose. For more information on how to authorise someone for your online affairs, go to svb.nl/digidmachtigen and click on 'English' at the top of the page.

1 Your details

First name, initials and surname

Street and number

Postcode and town/city

SVB reference

Daytime telephone number

2 Details of representative

First name, initials and surname

Street and number

Postcode and town/city

Daytime telephone number

3 Activities covered by this authorisation

Please tick one or more boxes

I authorise my representative to manage the following affairs for me with the SVB

- ☐ receiving correspondence addressed to me
- ☐ requesting or providing information in person or in writing
- ☐ viewing, requesting, changing or supplementing my details in accordance with the General Data Protection Regulation (GDPR)

4 Start date of authorisation

This authorisation will take effect on

date/month/year

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5 Duration of authorisation

I authorise this person to represent me

- ☐ for one time only
- ☐ temporarily until *date/month/year*
- ☐ until I cancel the authorisation in writing

6 Signature

Date *date/month/year*

Your signature

Send this form, together with any enclosures, to Sociale Verzekeringsbank, Postbus 18002, 3501 CA Utrecht, the Netherlands. You can also upload the form via My SVB.

SVB voor het leven
Sociale Verzekeringsbank

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